



MISSOURI DEPARTMENT OF REVENUE
TAX ADMINISTRATION BUREAU
P.O. BOX 898, JEFFERSON CITY, MO 65105-0898
(573) 751-2326 TDD 1-800-735-2966

**SAVINGS & LOAN ASSOCIATION - BUILDING &
LOAN ASSOCIATION TAX RETURN**

**1996
INT-3**

DLN

1997 TAXABLE YEAR BASED ON THE 1996 CALENDAR YEAR INCOME PERIOD.

DUE DATE APRIL 15, 1997

NAME

ADDRESS

CITY, STATE, ZIP CODE

FEDERAL I.D. NUMBER

COUNTY NUMBER

During this taxable year, have you been notified of a change in your Federal net income or Federal income taxes for any period? ☐ Yes ☐ No
(If yes, submit schedule of changes.)

NOTE: A COPY OF THE FEDERAL RETURN AND SUPPORTING SCHEDULES MUST BE ATTACHED TO THIS RETURN.

PART I

- | | |
|---|----|
| 1. Federal taxable income (loss) from Form 1120, Line 28 for calendar year 1996 | \$ |
| ADDITIONS | |
| 2. Income from State and/or Political subdivision obligations not included in Federal income
(Explain if different from Federal Form 1120, Schedule M-1, Line 7) | |
| 3. Income from Federal Government securities not included in Federal income | |
| 4. Bad Debt provision claimed on Federal return (Line 15, Form 1120) | |
| 5. Net bad debt recoveries | |
| 6. Missouri S & L Association - B & L Association Tax deducted on Federal return | |
| 7. Taxes deducted on Federal return, claimed as credits on this return. Enter here and Line 17 (Must be detailed on
Schedule A or attachment). Explain difference, if any between this amount and Federal Form 1120, Line 17, Page 1 | |
| 8. Other additions (Attach schedule) | |
| 9. TOTAL of Lines 1 through 8 | \$ |

PART II DEDUCTIONS

- | | |
|--|----|
| 10. Net bad debt chargeoffs | \$ |
| 11. Federal income tax deduction (see instructions) | |
| 12. Charitable contribution in excess of allowable federal deduction | |
| 13. Other deductions (Attach schedule) | |
| 14. Total of Lines 10, 11, 12, and 13 | |
| 15. Taxable income (Line 9 less Line 14) | \$ |

PART III COMPUTATION OF TAX

- | | |
|--|----|
| 16. Tax - Line 15 X 7% (If apportionment required see instructions) | \$ |
| 17. Credits from Line 7 above | |
| 18. Tax after allowable credits (subtract Line 17 from Line 16) | |
| 19.A. Less tentative payment or amount previously paid | |
| 19.B. Miscellaneous Credits (Attach schedule) | |
| 19.C. Enterprise Zone Credit | |
| 20. Less overpayment of previous year's tax (Attach approved credit voucher) | |
| 21. Net tax (Line 18 less Lines 19A, 19B, 19C and 20) | |
| 22. Interest for delinquent payment (See Instructions) | |
| 23. TOTAL AMOUNT DUE - Line 21 plus amount on Line 22 | \$ |

[illegible]

AMOUNT

TOTAL (Enter on Lines 7 and 17, Page 1)	\$	

AUTHORIZATION/NON-AUTHORIZATION	
<p>1. Authorization: The subject is authorized to perform the duties of the position.</p> <p>2. Non-Authorization: The subject is not authorized to perform the duties of the position.</p>	<p>3. Comments:</p>

☐ I authorize the Director of Revenue or his/her delegate to discuss my return and attachments with the preparer or any member of his/her firm.

☐ I do **NOT** authorize the Director of Revenue or his/her delegate to discuss my return and attachments with the preparer or any member of his/her firm.

SIGNATURE - PLEASE SIGN BELOW

_____, whose return is herewith submitted, declare that we have read and are familiar with all of the statements contained in this return, including the accompanying schedules (if any) all of which are true and correct, according to our best knowledge and belief, and that this return is a true and complete statement, in accordance with the law, for the taxable year covered.

SIGNATURE OF OFFICER	DATE	PREPARER'S SIGNATURE (OTHER THAN TAXPAYER)	DATE
TITLE OF OFFICER	PHONE NUMBER	PREPARER'S ADDRESS AND ZIP CODE	FEIN

MAKE CHECK PAYABLE TO "FINANCIAL INSTITUTION TAX". MAIL COMPLETED FORM AND ATTACHMENTS TO TAX ADMINISTRATION BUREAU, FINANCIAL INSTITUTION TAX SECTION, P.O. BOX 898, JEFFERSON CITY, MO 65105-0898.